

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SM		
O.I.P.E. CLASSIFIER		43	2/3/99
FORMALITY REVIEW	YUTU	168231	2-12-99

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 (Through numeral)... Canceled  
 - ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	2/10/01
2	2/10/01
3	2/10/01
4	2/10/01
5	2/10/01
6	2/10/01
7	2/10/01
8	2/10/01
9	2/10/01
10	2/10/01
11	2/10/01
12	2/10/01
13	2/10/01
14	2/10/01
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45	2/10/01
46	2/10/01
47	2/10/01
48	2/10/01
49	2/10/01
50	2/10/01

Claim	Date
Final	
Original	
51	2/10/01
52	2/10/01
53	2/10/01
54	2/10/01
55	2/10/01
56	2/10/01
57	2/10/01
58	2/10/01
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95	2/10/01
96	2/10/01
97	2/10/01
98	2/10/01
99	2/10/01
100	2/10/01

Claim	Date
Final	
Original	
101	2/10/01
102	2/10/01
103	2/10/01
104	2/10/01
105	2/10/01
106	2/10/01
107	2/10/01
108	2/10/01
109	2/10/01
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141	2/10/01
142	2/10/01
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145	2/10/01
146	2/10/01
147	2/10/01
148	2/10/01
149	2/10/01
150	2/10/01

If more than 150 claims or 10 actions  
 staple additional sheet here

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